# MINUTES OF JULY 27, 1999 PARAMEDIC TASK FORCE MEETING

Sacramento Airport Host Hotel

MEMBERS	EMSA STAFF	ALTERNATES	MEMBERS
<u>PRESENT</u>	<u>PRESENT</u>	<u>PRESENT</u>	<u>ABSENT</u>
Debbie Becker	Richard Watson	Michael Harris	Jim Holbrook
Bill Cody	Maureen McNeil	Nancy Justin	Bill Bower
Bill Koenig	Nancy Steiner	Jim Allen	Dean Anderson
Carol Gunter	Connie Telford	Dave Magnino	Marshall Morton
Sabina Imrie	Daryl Walker		Kevin Rittger
Jan Ogar	Tony Tobin		Sam Stratton
Karen Short			
Kevin White			AUDIENCE
Tony Pallitto			<u>PRESENT</u>
			Grant Goold

The meeting was convened at 10:00 a.m. Nancy Steiner introduced first time attendees; Jim Allen (the alternate for Kevin Rittger, M.D.), Tony Pallitto (who replaced Mark Reeves representing California Ambulance Association), Tony Tobin (a new EMSA employee), and Grant Goold (Victory Technology).

# I Review and Approval of June 29, 1999 Meeting Minutes

The minutes were corrected to show the correct date of the previous meeting. It should have read May 26, 1999 instead of April 28, 1999. There were no other changes.

### II Setting of the Agenda

<u>Will agendize for the next meeting:</u> Other issues the Paramedic Task Force may take on.

Time Frame for accomplishing tasks. Scope of Practice Statement.

# III Paramedic Task Force Member's Statement on Scope of Practice (Carol Gunter, Sam Stratton, Frank Pratt)

Carol Gunter provided a draft *recommendation of the task force* on the Scope of Practice of Paramedics for the task force members to review and discuss. This draft included some historical information, an overview of some of the current practices which vary from county to county, and some of the advantages and disadvantages of having a single scope of practice vs a basic and optional scope of practice. The task force will review this document and bring issues and questions to the next meeting, and send suggested revisions to the draft to the list serve.

A summary of the discussion points at this meeting included:

- What is the objective of a single vs optional scope of practice?
- Maybe scope of practice should be referred to as scope of training.
- Economics as well as geography affect scope of practice needs.
- Some counties include both urban and rural areas.
- There needs to be standardized basic scope of practice plus modules (i.e., rural) of training.
- The basic scope of practice needs to be standardized.
- There should be broad-based education and competencies, then specialized training to maintain competency.
- Medical control should be at the state level.
- Scope of practice and continuing education (CE) may affect each other. They need to be tied together.
- What should the state role be in the scope of practice and CE? There needs to be something in writing to look at.
- Lack of standardization may cause problems with law suits.

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There was also a request for the definitions of urban and rural.

This topic will be agendized for the next meeting.

# IV Paramedic Continuing Education Provisions

There was some discussion on whether or not California should adopt the CE requirements of the National Registry of EMTs (NREMT). Some members felt it was a good idea and suggested that maybe the NREMT requirements could be used in the future and maybe grant funds could be used for such programs as developing CE modules, and train the trainer courses. The representative for California Fire Chiefs Association felt they could not support the state requiring CE like the NREMT requires. EMSA will provide the task force with the number of California Paramedics that have re-registered with NREMT.

It was suggested that members of the task force review the NHTSA document "Education Component for the EMS Agenda for the Future". The final draft for peer review is on the NHTSA website, and Jim Allen will distribute this document through e-mail to the task force members. Nancy will distribute the EMDAC paper "Review of Skills Retention for EMT-Is" to task force members, and Carol Gunter will invite Baxter Larmon to speak to the task force members at the August meeting on the NHTSA CE Guidelines.

There was also discussion regarding measurement of competency and whether or not it can be measured, should it be included in the CQI process, or would skills testing be the way to determine that skills are competent.

This topic will be agendized for the next meeting.

### V Draft Model EMT-P Model Disciplinary Guidelines

Daryl handed out definitions of gross negligence, repeated negligent acts and incompetence. He will have the Attorney General's opinion for the next meeting and Karen Short will provide the BRN definitions. On the issue regarding tolling, language will be changed that will replace residence with place of employment.

The task force discussed listing paramedics on probation on the EMSA web page with access limited to local EMS Agencies and employers. The task force agreed that the list should be secured. Daryl will bring back to the task force a secured web site proposal for the task force to review and discuss.

Daryl is working on adding language of issues brought up in previous meetings.

The committee members went over proposed changes the the draft model disciplinary guidelines. Consensus was reached on some of the proposed changes, and the rest of the proposed changes will be discussed at the August meeting.

This topic will be agendized for the next meeting.

## VI Meeting Sites/Locations

The August 31st meeting will be held in Los Angeles at.

Michael Harris said the September 28<sup>th</sup> meeting could be held at the Alameda County EMS Agency, 1000 Broadway, 5<sup>th</sup> floor, in Oakland. He will bring maps to the next meeting.

### VII Adjournment

The meeting was adjourned at 3:40 p.m.